

# Should I take Paxlovid if I get covid? Here's what to know.

Paxlovid lowers risk of serious illness and hospitalization, and may help prevent long covid, yet many patients don't use the drug



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(Stephanie Nano/AP)

The antiviral drug Paxlovid can significantly reduce symptoms of covid-19 and dramatically lower the risk of severe illness or dying of the disease. Yet many eligible people aren't using it, and some doctors still hesitate to prescribe it.

A [recent study](#) by the National Institutes of Health found that only about 15 percent of eligible people took the drug. Experts aren't certain why some people decline to take Paxlovid, but anecdotally patients say they are worried about side effects or the risk of "rebound" covid.

[Peter Chin-Hong](#), an infectious-disease specialist at the University of California at San Francisco, said that over time, people have become less fearful of getting covid. "If you're over 75 and you're immune compromised, you hear all these

stories of nothing happening to lots of people,” Chin-Hong said. “You just get lulled into this sense of complacency.”

We spoke with several experts about Paxlovid, who should use it, its side effects and the risks of rebound covid. Here’s what they had to say.

## **WHAT TO KNOW**

- [Who should take Paxlovid?](#)
- [Does Paxlovid lower risk for long covid?](#)
- [Can a younger, healthy person take Paxlovid?](#)
- [Why aren’t more doctors prescribing Paxlovid?](#)
- [What if I’m taking other medications?](#)
- [Why does Paxlovid taste bitter?](#)

### **Who should take Paxlovid?**

Paxlovid is only effective if it is taken within five days of the first covid symptoms. Some people want to delay taking the drug to see if their covid symptoms get worse, but by then it could be too late for the drug to work. “If you take it right at that five-day mark, it’s possible the damage has already been done where the virus has already had its impact on the lungs, you’re already having an inflammatory response,” said [Scott Roberts](#), an assistant professor of infectious diseases at the Yale School of Medicine. “Before that viral load really starts ramping up, you have the potential to really knock it down and blunt the overall impact.”

Paxlovid is recommended for anyone 12 and older at high risk for complications from covid. This includes adults 50 and older because age is a significant risk factor for complications from covid and hospitalization. Anyone with underlying medical conditions that put them at higher risk, including obesity, high blood pressure, diabetes or a compromised immune system, should consider taking the drug.

“Just being a certain age puts you at increased risk of those complications,” said [Priya Nori](#), an infectious diseases physician at the Montefiore Medical Center in the Bronx. Pfizer paid Nori last year to speak about Paxlovid. “Being in the obese category on its own, separate from anything else, confers higher risk,” she said.

## **Does Paxlovid lower risk for long covid?**

The data is mixed but some research suggests that Paxlovid is associated with a lower risk of long covid, which is a range of lingering symptoms such as brain fog or fatigue that can last weeks or months after infection. One study of 282,000 covid patients found that Paxlovid reduced the risk of long covid by 26 percent in older adults and those with underlying medical conditions.

But a study at the University of California at San Francisco found that Paxlovid didn't reduce the risk in another set of vaccinated patients.

The risk of developing long covid isn't known, but an estimated 7 to 14 percent of American adults have experienced symptoms of long covid, defined as symptoms lasting three months or longer.

Michael Osterholm, director of the Center for Infectious Disease Research and Policy at the University of Minnesota, said he believes everyone who can take Paxlovid to treat covid should consider taking the drug.

"I just wouldn't want to take the chance of having long covid," Osterholm said. "Or, if I can reduce the number of days that I'm in bed, I want to do that."

In theory, infectious-disease experts say it makes sense that a drug designed to reduce the amount of virus in the body would lower a person's risk of chronic symptoms but studies have come to different conclusions, Nori said.

"I've not seen enough science yet to conclude definitively that it definitely helps or it definitely doesn't help," Nori said, adding that she hopes Paxlovid could help to lower the risk of chronic symptoms. "I don't think we know enough right now."

## **Can a younger, healthy person take Paxlovid?**

Yes. Some doctors prescribe the drug to people younger than 50. Younger, low-risk patients should weigh the side effects and rebound risk against the potential of a faster recovery, Chin-Hong said.

For adults who don't fall into one of the high-risk categories, the benefit of taking Paxlovid "is less clear," Nori said, because the likelihood they will have a serious case of covid is already low. "That becomes an individual decision," she said.

Joseph Khabbaza, a pulmonologist and critical care physician at the Cleveland Clinic, said he believes any adult who wants Paxlovid could benefit from taking the drug.

“Even healthy people who have a crummy, flu-like illness have a quicker improvement in those symptoms,” Khabbaza said. “It can work pretty quickly.”

### **Why aren’t more doctors prescribing Paxlovid?**

It’s not clear. Some doctors hesitate to prescribe the antiviral medication because of how the drug can interact with other prescriptions a patient might be taking, experts say.

The NIH study found regional variations in the use of Paxlovid, ranging from near zero to close to 50 percent treated with the drug in health-care systems across the country. Parts of the lower Midwest and Southeast had “limited adoption,” according to the study. Utah, the Mid-Atlantic and the Northwest appeared to have the greatest uptake of the medication.

Josh Fessel, a co-author of the study and the senior clinical adviser at NIH, said the study doesn’t explain the difference in use, but researchers found that if half of those eligible to take Paxlovid had used the drug, nearly 48,000 deaths could have been prevented.

“If we increased the utilization, we could reasonably expect to see lives saved and hospitalizations prevented,” Fessel said.

### **What if I’m taking other medications?**

One complicating factor in prescribing Paxlovid is that many high-risk patients are also taking medications for other conditions, and some of these drugs should not be taken with Paxlovid. The list of medications that Paxlovid can interact with includes certain cholesterol drugs, blood pressure and heart medications and migraine drugs. But in some cases, a doctor may advise patients that they can safely stop taking a drug before they start Paxlovid, Osterholm said, and restart it after the Paxlovid course is done.

Chin-Hong suggests having a conversation with your physician now, so you're not "scrambling to find somebody to answer your questions" about Paxlovid after you get sick.

*Four years on, long covid still confounds us. Here's what we now know.*

### **Why does Paxlovid taste bitter?**

Paxlovid can leave a bitter, metallic taste in your mouth. Infectious-disease experts who have taken Paxlovid say they had the bitter taste but it was manageable. "It's not unbearable at all," Chin-Hong said. "I was still able to eat."

The antiviral medication is a five-day course of nirmatrelvir and ritonavir taken in tablets twice a day. Nirmatrelvir "shuts down the virus-making factory" before the coronavirus is replicated by blocking the chemical needed to produce the virus, Chin-Hong said.

Ritonavir is what's "causing the metallic taste," Osterholm said. It slows the metabolism of nirmatrelvir, keeping the drug in the body for a longer period of time.

Other possible side effects of Paxlovid include diarrhea, nausea, headaches and vomiting.

### **What's the risk of rebound on Paxlovid?**

Some people worry that taking Paxlovid will make their illness last longer because of the risk of "rebound." Rebound occurs when a patient appears to recover from the disease, only to test positive again for the virus.

Roberts said "the jury is still out" on whether Paxlovid increases rebound risk. He said the concern is not a reason to skip the drug.

"Rebound is a low-risk event," Roberts said, conceding that it may be unpleasant. "Your symptoms are prolonged, and your isolation might be prolonged. But that doesn't mean Paxlovid didn't do what it's meant to do, which is to keep you out of the hospital."

Patients with rebound tend to have “very, very mild” symptoms the second time around, Chin-Hong said.

The Centers for Disease Control and Prevention says that even people who don’t take Paxlovid can get rebound, and recently published a review suggesting that rebound rates are similar among those who take the drug and those who don’t.

“What we really wanted people to know is that the risk of rebound doesn’t outweigh the benefit of taking antiviral treatment if you’re at high risk of hospitalization or death,” said Pragna Patel, the chief medical officer of the CDC’s Coronavirus and Other Respiratory Viruses Division and one of the authors of the review.

The CDC says people who rebound should assume they’re contagious, isolate again and wear a mask.

It’s not clear what causes covid to rebound in some cases, Roberts said. It could be “the natural course” of the infection or that the five-day treatment course of the antiviral medication isn’t a long enough time frame. He said researchers are looking into whether a seven- or 10-day course may reduce the risk of a rebound.

<https://www.washingtonpost.com/wellness/2024/01/08/paxlovid-antiviral-covid-rebound/>